## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE rEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless correcte maintenance fee notificat	ed below or directed oth tions.	erwise in Block I, by (a	s) specifying a new corres				
CURREN'T CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
77650	7500 0447	maaa	pape have	ers. Each additional e its own certificate	paper, such as of mailing or tra	an assignment ansmission.	or formal drawing, must
73552 Stolowitz Ford 621 SW Morriso Suite 600	n St	I he Stat addi tran	Cert reby certify that this es Postal Service w ressed to the Mail smitted to the USPT	Ificate of Maili s Fce(s) Transm ith sufficient po Stop ISSUE F TO (571) 273-28	ng or Transmi nittal is being d stage for first EE address al 885, on the date	Ission deposited with the United class mail in an envelope bove, or being facsimile e indicated below,	
Portland, OR 972	205						(Depositor's name)
•	•						(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DO	CKET NO	CONFIRMATION NO.
09/767,330 01/22/2001			. Scott Thomas Molloy 2705-0396		396	9338	
APPLN. TYPE	MILE (FAX) SYSTEMS	ISSUE FEE DUE	TOMATIC DOCUMENT	PREV. PAID ISSUE		. FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440		09/17/2008.
EXAM	EXAMINER		CLASS-SUBCLASS	]			
SAM, P	HIRIN	2619 .	370-466000				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			" ", "				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
	chnology, Inc.			California		•	
lease check the appropri	iate assignce category or	categories (will not be pr	rinted on the patent):	Individual X Co	rporation or oth	er private grou	p entity Government
Advance Order - I	to small entity discount p	tb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  X Payment by credit card. EFS submission  X The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4348 (enclose an extra copy of this form).					
5. Change in Entity Stat	tus (from status indicated s SMALL_ENTITY statu		□ h	1-:: 01447	I Parmirel	. 0 . 45 077	
			b. Applicant is no lon d from anyone other than t Office.	he applicant; a regis	stored attorney of	or agent; or the	assignee or other party in
Authorized Signature	Much			Date	16/200	2,444	
Typed or printed name	·			Registration N	v		
This collection of inform an application. Confident submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this but irginia 22313-1450. DC 13-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the O NOT SEND FEES OR	on is required to obtain or 1.14. This collection is est depending upon the indivention Office COMPLETED FORMS TO	retain a benefit by the timated to take 12 no vidbal case. Any corer, U.S. Patent and This ADDRESS	ne public which ninutes to comp mments on the Trademark Offic SEND TO: Co	is to file (and to lete, including amount of time ce, U.S. Depart commissioner fo	by the USPTO to process) gathering, preparing, and eyou require to complete timent of Commerce, P.O. r Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.